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09/890,478

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MAY 3 1 2005 RM	First Named Inventor	PIZZARIELLO
(to be used for all carespondence after initial filing)	Art Unit	1753
BADENSON	Examiner Name	NOGUEROLA
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ENCLOSURES (Check all that apply)		
X Fee Attached X Amendment/Reply After Final Affidavits/declaration(s) X Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Conv of Priority Rema		After Allowance Communication to Group Appeal Communication to Board of Appeals and Interferences Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below): overpayment to Deposit Account Number 19-4330.
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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number Effective on 12/08/2004. Complete if Known the Consolidated Appropriations Act. 2005 (H.R. 4818). 09/890,478 Application Number JULY 31, 2001 Filing Date For FY 2005 PIZZARIELLO ET AL. First Named Inventor **Examiner Name** NOGUEROLA Applicant clayins small entity status. See 37 CFR 1.27 Art Unit 1753 OTAL MENT OF PAYMENT 0.00 NOTAR-005US Attorney Docket No. METHOD OF PAYMENT (check all that apply) X | Check | Credit Card None Money Order Other (please identify): 19-4330 Deposit Account Deposit Account Number:____ _ Deposit Account Name: Stetina Brunda Garred & Brucker For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) X Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES SEARCH FEES EXAMINATION FEES Small Entity Small Entity** Small Entity **Application Type** Fee (\$) Fee (\$) Fee (\$) Fees Paid (\$) Fee (\$) Fee (\$) Fee (\$) Utility 300 150 500 200 250 100 Design 200 100 100 130 50 65 Plant 200 100 300 150 160 80 Reissue 300 150 500 600 250 300 Provisional 200 100 0 0 0 2. EXCESS CLAIM FEES **Small Entity** Fee (\$) Fee Description Fee (\$) Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 50 25 Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100 Multiple dependent claims 180 360 **Total Claims Extra Claims** Fee (\$) Fee Paid (\$) **Multiple Dependent Claims** - 20 or HP = Fee Paid (\$) Fee (\$) HP = highest number of total claims paid for, if greater than 20 Extra Claims Indep. Claims Fee (\$) Fee Paid (\$) - 3 or HP = HP = highest number of independent claims paid for, if greater than 3 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) _____ (round up to a whole number) x 250.00 0.00 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other: PETITION FOR EXTENSION OF TIME TO REPLY 60.00 SUBMITTED BY Registration No. Signature Telephone

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36,224

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